

Appendix 2 – Ring & Ride Customer Survey

Ring and Ride Customer Survey

Please return completed surveys by email to bus.registrations@flintshire.gov.uk in the pre-paid envelope enclosed by **8th December 2024 to confirm your continued registration of service.**

Name: _____

Address: _____

Telephone: _____

Email: _____

1. Do you wish to continue to be registered for the Ring and Ride service?

- Yes – please continue with the remaining questions
 No – please return and we will remove you from our mailing list

2. What do you use the service for?

- NHS doctor appointments
 NHS dental appointments
 Other NHS appointments (please specify) _____
 Other (please specify) _____

3. Where do you travel to? (Name of Centre & location) Please list all that apply:

4. Do you have a car or access to a car?

- Yes No

5. Are you able to use a bus service?

- Yes No

6. What prevents you from using a car and/or bus service?

7. If you are going to hospital for an appointment, you might be eligible to use the Welsh Ambulance Service Patient Transport Service. Could you use the Welsh Ambulance Patient Transport Service (for hospital appointments)?

- Yes No, please state why not _____

8. Are you aware of the Council's Fflecsi transport services for residents in the Holywell and Buckley areas?

- Yes No

9. Are you aware of the following voluntary services in Flintshire?

Welsh Border Community Transport Yes No

Estuary Voluntary Car Scheme Yes No

Have you considered using them? Yes No why not? _____

Thank you for your time, we will be in touch with all members of the Ring and Ride service with more information in the coming months.